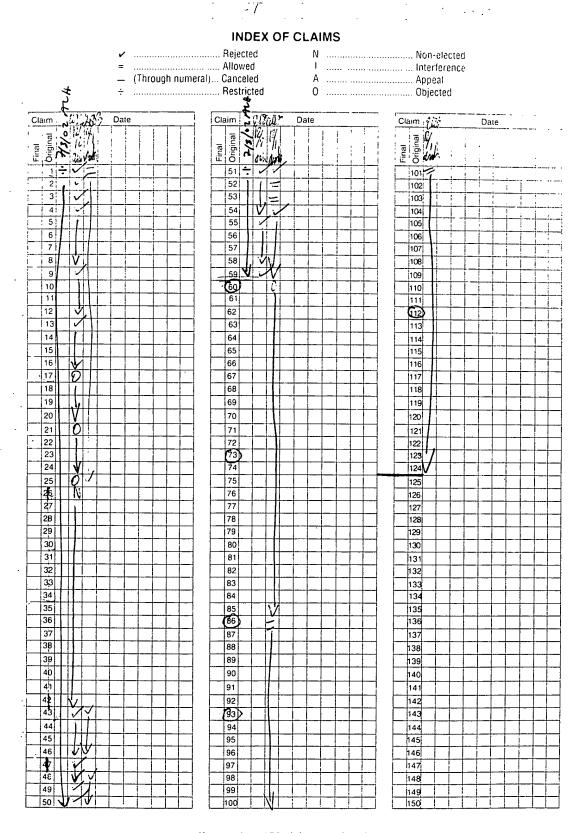
POSITION INITIALS ID NO. DATE

FEE DETERMINATION
O.I.P.E. CLASSIFIER
FORMALITY REVIEW
RESPONSE FORMALITY REVIEW



BEST AVAILABLE COPY

If more than 150 claims or 10 actions staple additional sheet here

(LEFT INSIDE)